

| POSITION                  | INITIALS           | ID NO. | DATE    |
|---------------------------|--------------------|--------|---------|
| FEE DETERMINATION         |                    | 44181  | 2-3-60  |
| O.I.P.E. CLASSIFIER       | <i>[Signature]</i> | 3      | 2-1-61  |
| FORMALITY REVIEW          | W N                | 67479  | 3-22-60 |
| RESPONSE FORMALITY REVIEW |                    |        |         |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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